DLN: 93493232014050 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 10-01-2018 , and ending 09-30-2019 C Name of organization NATIONAL PUBLIC RADIO INC D Employer identification number B Check if applicable ☐ Address change 52-0907625 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1111 NORTH CAPITOL STREET NE ☐ Amended return ☐ Application pending (202) 513-2000 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC  $\,$  20002 **G** Gross receipts \$ 407,737,202 Name and address of principal officer H(a) Is this a group return for JOHN LANSING □Yes ☑No subordinates? 1111 NORTH CAPITOL STREET NE H(b) Are all subordinates WASHINGTON, DC 20002 ☐ Yes ☐No included? Tax-exempt status **✓** 501(c)(3) П 4947(a)(1) or □ 527 If "No," attach a list (see instructions) 501(c)( ) **◄** (insert no ) **H(c)** Group exemption number ▶ Website: ► WWW NPR ORG L Year of formation 1970 M State of legal domicile DC K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities NPR WORKS IN PARTNERSHIP WITH ITS MEMBER PUBLIC RADIO STATIONS TO CREATE A MORE INFORMED PUBLIC - ONE CHALLENGED AND INVIGORATED BY A DEEPER UNDERSTANDING OF EVENTS, IDEAS AND CULTURES Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 22 Number of independent voting members of the governing body (Part VI, line 1b) 1,335 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 61,861,647 7b b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 97,140,734 109,112,881 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . 142,185,731 163,474,736 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 4,060,065 1,310,839 8,574,133 3,809,460 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 251,960,663 277,707,916 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 276,841 1,986,515 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 144,078,971 155,969,720 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶14,414,493 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 99,507,899 114,763,884 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 243,863,711 272,720,119 19 Revenue less expenses Subtract line 18 from line 12 . 8,096,952 4,987,797 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 357,686,876 374,768,060 234,687,968 21 Total liabilities (Part X, line 26) . 224,754,593 22 Net assets or fund balances Subtract line 21 from line 20 . 140,080,092 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-08-19 Signature of officer Sign Here DEBORAH A COWAN CFO AND TREASURER Type or print name and title Date Print/Type preparer's name Preparer's signature Check I If P00397829 Paid self-employed Firm's name RSM US LLP Firm's EIN ▶ 42-0714325 **Preparer** Use Only Firm's address ► 2021 L STREET NW Phone no (202) 293-2200 WASHINGTON, DC 20036 ☐ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

	990 (2018)					Page <b>2</b>
Рa	statement o	of Program Servi	ce Accomplis	hments		
	Check if Schedi	ule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly describe the or	ganızatıon's mıssıon				
INVI PROI JOUF	GORATED BY A DEEPER DUCES, ACQUIRES, AND	UNDERSTANDING AID DISTRIBUTES NONCE EXPRESSION, NPR	ND APPRECIATIO COMMERCIAL PRO REPRESENTS ITS	N OF EVENTS, IDEAS A OGRAMMING THAT MEE S MEMBER STATIONS I	E A MORE INFORMED PUBLIC - C AND CULTURES TO ACCOMPLISH ETS THE HIGHEST STANDARDS C N MATTERS OF THEIR MUTUAL II	ITS MISSION, NPR OF PUBLIC SERVICE IN
2	Did the organization u the prior Form 990 or	☐ Yes ☑ No				
	If "Yes," describe thes	e new services on Sc	hedule O			
3	Did the organization co	ease conducting, or r	nake significant i	changes in how it cond	ucts, any program	☐ Yes ☑ No
	If "Yes," describe thes	e changes on Schedu	ıle O			
4					largest program services, as me	
	expenses, and revenue				of grants and allocations to other	s, the total
4a					of grants and allocations to other	90,603,053 )
4a 4b	expenses, and revenue	e, If any, for each pro	ogram service re	ported		
	(Code See Additional Data (Code	e, If any, for each pro	ogram service re 160,469,991	ported Including grants of \$	1,986,515 ) (Revenue \$	90,603,053 )
4b	expenses, and revenue  (Code See Additional Data  (Code See Additional Data  (Code	e, If any, for each pro ) (Expenses \$  ) (Expenses \$	160,469,991 18,952,076	including grants of \$  including grants of \$	1,986,515 ) (Revenue \$ ) (Revenue \$	90,603,053 ) 7,656,259 )
4b	expenses, and revenue  (Code See Additional Data  (Code See Additional Data  (Code See Additional Data  (Code See Additional Data	e, If any, for each pro ) (Expenses \$ ) (Expenses \$  ) (Expenses \$  ) (Expenses \$	160,469,991 18,952,076 797,987 402,013	including grants of \$  including grants of \$  including grants of \$  including grants of \$	1,986,515 ) (Revenue \$  ) (Revenue \$  ) (Revenue \$  ) (Revenue \$	90,603,053 ) 7,656,259 ) 3,699,867 )
4b 4c	expenses, and revenue  (Code See Additional Data  (Code See Additional Data  (Code See Additional Data  (Code CONSUMER PRODUCTS	) (Expenses \$	160,469,991 18,952,076 797,987 402,013	Including grants of \$  Including grants of \$  Including grants of \$  Including grants of \$	1,986,515 ) (Revenue \$  ) (Revenue \$  ) (Revenue \$	90,603,053 ) 7,656,259 ) 3,699,867 )

Form	orm 990 (2018) Page <b>3</b>										
Par	tiV Checklist of Required Schedules										
		$\square$	Yes	No							
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes								
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes								
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No							
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4	Yes								
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5		No							
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No							
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No							
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III 2	8		No							
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No							
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes								
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable										
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes								
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No							
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No							
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 📆	11d		No							
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No							
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes								
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a		No							
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes								
13	Is the organization a school described in section $170(b)(1)(A)(II)$ ? If "Yes," complete Schedule E	13		No							
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes								
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes								
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No							
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No							
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No							
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No							
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No							
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No							
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b									
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes								

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . .

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

22

22

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L,</i> Part IV			
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No
	Part IV	28b		No
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

Check if Schedule O contains a response or note to any line in this Part V .

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

Yes

895

0

1a

1b

Page 4

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

Form **990** (2018)

10a

10b

11a

11b

12b

13b

13c

n 990 (	2018)			Page
art VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	ines
ection	n A. Governing Body and Management			
		$\longrightarrow$	Yes	No
a Ente	r the number of voting members of the governing body at the end of the tax year 23			
body	ere are material differences in voting rights among members of the governing , or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O			
Ente	r the number of voting members included in line 1a, above, who are independent			
	1b   22	.		
	any officer, director, trustee, or key employee have a family relationship or a business relationship with any other er, director, trustee, or key employee?	2		No
	he organization delegate control over management duties customarily performed by or under the direct supervisior ficers, directors or trustees, or key employees to a management company or other person?	3		No
Did t	he organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
Dıd t	he organization become aware during the year of a significant diversion of the organization's assets?	5		No
Dıd t	he organization have members or stockholders?	6	Yes	
	he organization have members, stockholders, or other persons who had the power to elect or appoint one or more ibers of the governing body?	7a	Yes	
	any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or one other than the governing body?	7b	Yes	
	he organization contemporaneously document the meetings held or written actions undertaken during the year by ollowing			
The g	governing body?	8a	Yes	
	committee with authority to act on behalf of the governing body?	8b	Yes	
	ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
ection	<b>B. Policies</b> (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
		$\longrightarrow$	Yes	No
	he organization have local chapters, branches, or affiliates?	10a		No
and l	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
form		11a	Yes	
	ribe in Schedule O the process, if any, used by the organization to review this Form 990	$\sqcup$		
	he organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	e officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	12b	Yes	
	he organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done	12c	Yes	
Did t	he organization have a written whistleblower policy?	13	Yes	
Did t	he organization have a written document retention and destruction policy?	14	Yes	
	he process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
The o	organization's CEO, Executive Director, or top management official	15a	Yes	
Othe	r officers or key employees of the organization	15b	Yes	
If "Ye	es" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ble entity during the year?	16a	Yes	
ın joi	es," did the organization follow a written policy or procedure requiring the organization to evaluate its participation int venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
statu 	is with respect to such arrangements?	16b		No
	n C. Disclosure			
Lıst t	the States with which a copy of this Form 990 is required to be filed DC , AL , AK , AR , CA , CO , CT , GA , HI , MD , MA , MI , MN , MS , MO , NH , NJ , NI , OK , OR , PA , RI , SC , TN , UT , VA , WA	М, NY,	, NC , N	
	on 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s) available for public inspection. Indicate how you made these available. Check all that apply	.,	, ··· <u>-</u>	
	Own website $\Box$ Another's website $\overline{f Z}$ Upon request $\Box$ Other (explain in Schedule O)			
	ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
	y, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records NPR DEBORAH A COWAN CFO 1111 NORTH CAPITOL ST NE WASHINGTON, DC 20002 (202) 513-2000

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101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (	Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), ( if the organization's <b>current</b> key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five <b>current</b> high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's <b>former</b> office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's <b>former dir</b> e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

4002 SOLUTION CENTER CHICAGO, IL 606774000

compensation from the organization ▶ 91

Page 8

	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than o	one b	ox, t an of tor/t	ot che unle: fficer	neck mo ess pers er and a tee)	son a	(D) Reporta compens from t organizatio	able sation :he on (W-	(E) Reportable compensation from related organizations (\)	w-	(F) Estimated amount of other compensation from the organization and		
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-M	<b>415</b> C)	2/1099-MISC		organizati relati organiza	ed	
See /	Additional Data Table		<del>                                     </del>	+	$\vdash$	+	+	$\vdash$							
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	oub-rotar	art VII <b>, Section</b>	Α.		٠.	1	-					+			
d T							<b>•</b>	_	9,098	<u> </u>		0		714,515	
2	Total number of individuals (including of reportable compensation from the			e liste	ed a	bove	e) who	) rece	eived more t	than \$1	00,000				
													Yes	No	
3	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule 3</i>			:ee, k	ey e •	mpl	oyee, d	or hi	ghest compe	ensated	employee on	3	Yes		
4	For any individual listed on line 1a, is organization and related organizations										n the				
	ındıvıdual			•	•	•						4	Yes		
5	Did any person listed on line 1a receiv services rendered to the organization								-	or indi	vidual for	5		No	
Se	ction B. Independent Contract												•		
1	Complete this table for your five higher from the organization Report comper	nsation for the c									ı's tax year	npens			
	Name a	(A) and business addre	ess							Desc	(B) ription of services		(C Compen		
WHYY					_	_			ACC		PROGRAMS			,531,245	
	ORTH SIXTH STREET DELPHIA, PA 19106														
	CONFERENCES LLC								ACC	QUIRED F	PROGRAMS		3	,673,021	
	UDSON STREET FLOOR 12														
WBUR	YORK, NY 10013								ACC	QUIRED F	PROGRAMS		3	,012,827	
	ON UNIVERSITY PO BOX 28770														
NEW Y	YORK, NY 10087 ORKING CONCEPTS INC					—			Isys	ETEM REN	NEWAL AND SUPPOR	РΤ	1.	,989,935	
	BROKEN LAND PARKWAY SUITE 402									J12	1E11/1E/11/2 00	``	-,	.505,522	
COLU	MBIA, MD 210453024								100	TADDIAL	CERVICEC		- 1	270 445	
CXVV	FACILITY SERVICES INC								אואר	NITORIAL	SERVICES		1	,879,445	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part	VIII											
			e O contains a	respo	nse or note to any	line in thi	s Part VIII					$\square$
		O I CON II CON ICON				( <b>A</b> Total re	.)	Rel ex fu	(B) ated or kempt nction	(C) Unrelate busines revenu	s	(D) Revenue excluded from tax under sections
	1a	Federated campaign	ns	1a	395,794			re	venue		l	512 - 514
ints	ŀ	<b>b</b> Membership dues .	[	<b>1</b> b								
Gra mo		c Fundraising events	[	1c								
īš, Ā		d Related organization	ns	1d	16,204,899							
. <u>G</u>		e Government grants (co	ontributions)	1e	284,885							
itions, er Sin	f	<ul> <li>All other contributions, and similar amounts no above</li> </ul>	gifts, grants, ot included	1f	92,227,303							
Contributions, Gifts, Grants and Other Similar Amounts	و	g Noncash contribution in lines 1a - 1f \$	ons included									
ತಿ ಕ	ı	<b>h Total.</b> Add lines 1a-	1f		•	10	9,112,881					
a.					Business	Code			70.700	171		
ine		STATION PROGRAMMING				515100	<u>'</u>	89,174	79,789	,1/4	60 422 6	257
₽. ^₹	_	DIGITAL AND EVENT SP				900004		33,357	7,656	350	60,433,3	
4CE	_	DISTRIBUTION SERVICE	:S 			515100		31,095			1,058,2	200
Ser.	-	DIGITAL SERVICES				518210		99,867	5,531 3,699			
an	е	MEMBERSHIP DUES				515100						
Program Service Revenue	f	All other program se	rvice revenue				5,3	06,784	5,282	,784	24,0	000
•	g.	<b>Total.</b> Add lines 2a–2	f		<b>▶</b> 163,4	74,736						
	s	•		•	<b>•</b>		1,429,20	6			-642	1,429,848
		Income from investme		-			2,658,586	5				2,658,586
	51	Royalties	(ı) Real	•	▶ (II) Personal	<u> </u> 	2,030,380					2,036,360
	6a	Gross rents	(i) iteal		(ii) i cissiiai	1						
	b	Less rental expenses	57	74,214 0								
	c	: Rental income or	57	4,214		1						
		(loss)				_	F74.04					
	d	Net rental income oi	r (loss) (ı) Securiti		(II) Other		574,214	4				574,214
	7a	Gross amount from sales of assets other than inventory	129,18		· · ·	_						
	b	Less cost or other basis and sales expenses	129,06	8,304	235,371	_						
	С	Gain or (loss)	11	7,004	-235,371	†						
	d	l Net gaın or (loss) .		•	<b>&gt;</b>	<u>]</u>	-118,36	7				-118,367
ane	8a	Gross income from fu (not including \$ contributions reporte		nts f								
Revenue		See Part IV, line 18		a								
Re		Less direct expenses		b								
Other		: Net income or (loss) : Gross income from g			ents •	1						
Ö		See Part IV, line 19										
	h	• I	_	a b		-						
		Less direct expenses : Net income or (loss)			les	]						
	10a	Gross sales of invent										
		returns and allowanc	es	a	1,152,528							
	b	Less cost of goods s	old	ь	725,611	-						
		: Net income or (loss)		ı ınvent	ory <b>&gt;</b>	J	426,91	7	80,185		346,732	
		Miscellaneous	Revenue		Business Code							
	11	aparking garage f	EES		812930		379,636	6				379,636
	b	SPACE AND STUDIO	LICENSE FEES	5	900099		178,118	8				178,118
	С	MISCELLANEOUS RE	VENUE		900004	i.	-408,01	1				-408,011
		All other revenue .										
		e <b>Total.</b> Add lines 11a			•		149,74	3				
	12	Total revenue. See	Instructions	• •	• • • •		277,707,91	6	102,039,364	61,	861,647	4,694,024

Form 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	-	· ·	olete column (A)	
Check if Schedule O contains a response or note to any	Ine in this Part IX			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,701,630	1,701,630		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	284,885	284,885		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	8,631,188	3,446,182	4,948,062	236,944
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	121,330,224	96,308,832	20,823,659	4,197,733
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,053,753	5,064,782	881,429	107,542
9 Other employee benefits	10,607,489	8,693,510	1,509,474	404,505
<b>10</b> Payroll taxes	9,347,066	7,250,338	1,767,448	329,280
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	1,627,836	14,115	1,613,721	
c Accounting	489,370	2,134	487,236	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	201,758	34,502	167,256	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,189,921	6,050,962	3,927,329	211,630
12 Advertising and promotion	1,810,784	953,190	849,602	7,992
13 Office expenses	4,207,680	1,985,201	2,144,381	78,098
14 Information technology	6,483,267	3,938,314	2,535,107	9,846
15 Royalties				

9,179,418

6,401,574

2,031,330

5,755,160

9,702,209

1,222,740

24,684,223

16,118,669

5,031,603

1,457,636

8,168,706

272,720,119

2,125,236

5,234,576

1,148,039

1,553,466

24,673,630

5,031,603

141,064

4,981,772

180,622,067

4,104

7,054,182

851,413

564,816

5,755,160

8,148,743

1,218,636

10,583

8,059,335

1,272,758

3,093,229

77,683,559

315,585

318,475

10

8,059,334

43,814

93,705

14,414,493

Form 990 (2018)

	, , ,			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$			
7	Other salaries and wages	121,330,224	96,308,832	2
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,053,753	5,064,782	
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	1

16 Occupancy .

23 Insurance .

**20** Interest . . . .

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization .

21 Payments to affiliates . . . .

expenses on Schedule O ) a CONTENT ACQUISITION

**b** CORPORATE SPONSORSHIP

d TRAINING, RECRUITMENT,

c SATELLITE LEASE AND

e All other expenses

**17** Travel .

Page **11** 

374.768.060

42,087,985

25,837,072

166,762,911

374,768,060

Form **990** (2018)

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					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		•	12,453	1	13,855
	2	Savings and temporary cash investments .			12,855,933	2	15,813,000
	3	Pledges and grants receivable, net		•	12,598,310	3	9,396,378
	4	Accounts receivable, net			36,109,560	4	32,154,198
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L Loans and other receivables from other disqualit	nployees Complete	0	5	0	
S	6	section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	0	6	0		
ssets	7	Notes and loans receivable, net	0	7	0		
SSI	8	Inventories for sale or use		•	886,573	8	430,225
٩	9	Prepaid expenses and deferred charges			2,018,315	9	6,059,604
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	267,741,973			
	b	Less accumulated depreciation	<b>10</b> b	62,069,065	210,400,696	<b>10</b> c	205,672,908
	11	Investments—publicly traded securities .			78,934,819	11	99,903,004
	12	Investments—other securities See Part IV, line		268,983	12	0	
	13	Investments—program-related See Part IV, line		3,601,234	13	5,324,888	
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			0	15	0

357,686,876

31,392,486

22,104,148

171,257,959

16

17

18

19

20

21

22 0 23

34

357,686,876

16

17

18

19

20

21

34

Liabilities

**Total assets.**Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

Grants payable . .

Deferred revenue . . . .

Total liabilities and net assets/fund balances

Form 990 (2018)

	24	Unsecured notes and loans payable to unrelated third parties	0	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	0	25	
	26	Total liabilities. Add lines 17 through 25	224,754,593	26	234,687,968
ances	27	Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	114,945,844	27	118,972,732
Bal	28	Temporarily restricted net assets	17,986,439	28	21,107,360
2	29	Permanently restricted net assets	0	29	
=		Overnientians that do not follow SEAS 117 (ASS OF9)			

ance	27	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	114,945,844	27	118,972,732
Bal	28	Temporarily restricted net assets	17,986,439	28	21,107,360
Þ	29	Permanently restricted net assets	0	29	
Ē		Organizations that do not follow SFAS 117 (ASC 958),			
S 0	30	check here ► □ and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	132,932,283	33	140,080,092
Z		T + 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	257.000.070		274 700 000

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a No

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b Form 990 (2018)

### Additional Data

Software ID:

Software Version:

EIN: 52-0907625

Name: NATIONAL PUBLIC RADIO INC

Form 990 (2018)

## Form 990, Part III, Line 4a:

NEWS AND INFORMATION, PROGRAMMING, AND ENGINEERING - NPR IS ANINTERNATIONALLY RECOGNIZED PRODUCER AND DISTRIBUTOR OF NEWS, DIGITAL MEDIA, PROGRAMMING, AND AN INDUSTRY LEADER IN SOUNDGATHERING AND AUDIO PRODUCTION DURING THIS FISCAL YEAR, NPR'SBROADCAST PROGRAMMING REACHED A WEEKLY AUDIENCE OF 27 4 MILLION PEOPLE ABOUT 98 5% OF THE U.S. POPULATION IS WITHIN THE LISTENING AREA OF ONE OR MORE STATIONS THAT CARRY NPR PROGRAMMING NPR PRODUCES AND/OR DISTRIBUTES 26 NEWS, TALK, MUSIC AND ENTERTAINMENT BROADCAST PROGRAMS, AND 15 PODCAST-ONLY PROGRAMS (APPROXIMATELY 10 1 MILLION AVERAGE UNIQUE WEEKLY USERS OF NPR-PRODUCED PODCAST PROGRAMS), AND 11 5 MILLION UNIQUE VISITORS TO NPR ORG WEEKLY, MARKING AN INCREASE OVER THE PAST YEAR OF 51% FOR PODCASTS AND A DECREASE OF 3% FOR NPR ORG. SMART SPEAKER STREAMING WEEKLY AUDIENCE INCREASED 60% FROM THE PAST FISCAL YEAR ADDITIONALLY, NPR PROGRAMMING IS HEARD ON SMART SPEAKERS, SATELLITE RADIO, HD RADIO, ITUNES RADIO, ON MEMBER STATION WEB STREAMS, AND INTERNATIONALLY NPR ALSO BROADCASTS ITS PROGRAMMING TO THE U.S. MILITARY AND THEIR FAMILIES THROUGH THE ARMED FORCES RADIO NETWORK AND OTHER INTERNATIONAL SERVICES SOME PROGRAMS PRODUCED AND/OR DISTRIBUTED BY NPR INCLUDE MORNING EDITION. ALL THINGS CONSIDERED. WEEKEND EDITION, FRESH AIR, THE TED RADIO HOUR, ASK ME ANOTHER, 1A, WAIT WAIT DON'T TELL ME', HERE & NOW, INVISIBILIA, AND NPR NEWSCASTS 24 HOURS A DAY NPR'S DIGITAL MEDIA DIVISION EXPANDS NPR'S PUBLIC SERVICE BY OFFERING NPR CONTENT FREE OF CHARGE ON THE WEB, MOBILE DEVICES, VIA DISTRIBUTION PARTNERSHIPS WITH THIRD-PARTY PLATFORMS AND ON OTHER EMERGING DIGITAL CHANNELS MONTHLY, NPR'S DIGITAL CONTENT REACHES APPROXIMATELY 34.260.000 USERS THAT CONTENT INCLUDES REAL-TIME NEWS REPORTS, LIVE AUDIO STREAMS, LIVE VIDEO STREAMS, ON-DEMAND DOWNLOADS AND STREAMS OF NPR AND MEMBER STATION AUDIO, ON-DEMAND VIDEO SEGMENTS, ARCHIVAL AUDIO SPANNING MORE THAN A DECADE, ORIGINAL TEXT STORIES AND PHOTOS, ADDITIONAL INFORMATION AND INSIGHT INTO REPORTS AIRING ON NPR PROGRAMS, COMMENTARY, AND CONTENT EXCLUSIVE TO THE INTERNET SOME OF THE DIVISION'S PROJECTS THIS YEAR INCLUDED VETTING AND SELECTING A CONTENT MANAGEMENT SYSTEM WHICH WILL REPLACE THE SYSTEMS CURRENTLY IN USE BY NPR AND MEMBER STATIONS. BEGINNING THE MIGRATION OF STATIONS CURRENTLY USING A LEGACY SERVICE TO THE NEW ONE. EXPANDING THE PLACEMENT OF STATION HEADLINES AND STORIES ON NPR ORG AND THE COLLECTING AND SHARING OF EMAIL ADDRESSES WITH STATIONS, PLANNING AND DESIGNING A NEW MOBILE APPLICATION THAT WILL COMBINE THE FEATURES OF THE TWO NPR-BRANDED APPS CURRENTLY IN THE MARKET, AND LAUNCHING A NEW FUNCTION ON THE AMAZON ALEXA PLATFORM THAT ENABLES THE CONTINUOUS PLAY OF AUDIO SEGMENTS. THE DIVISION ALSO LAUNCHED A YEAR-LONG "PUBLIC RADIO INCUBATION LAB" CHARGED WITH ADDRESSING STRATEGIC CHALLENGES THAT CONFRONT OUR DIGITAL BUSINESS AND PROTOTYPING PRACTICAL SOLUTIONS STRUCTURED AS A ROTATION PROGRAM COMPRISING STAFF FROM NPR AS WELL AS MEMBER STATIONS. THE LAB FOCUSED ON NEW APPROACHES TO SUPPORTING STATION MEMBERSHIP-SOLICITATION ON NPR'S DIGITAL PLATFORMS IN PARTNERSHIP WITH PBS AND TWO MAJOR PUBLIC TV-RADIO STATIONS, WGBH AND KQED, NPR HELPED SECURE INITIAL FUNDING FROM THE CORPORATION FOR PUBLIC BROADCASTING TO HELP SUPPORT LICENSING AND IMPLEMENTATION COSTS OF THE SHARED CONTENT MANAGEMENT SYSTEM DESCRIBED ABOVE AS WELL AS A "SINGLE-SIGN-ON" FEATURE THAT CAN ENABLE PUBLIC MEDIA ORGANIZATIONS TO GATHER MORE PERSONALIZED DATA FROM DIGITAL AUDIENCES IN ORDER TO ENGAGE THEM AND ACTIVATE THEM TOWARD MEMBERSHIP. THESE TWO PROJECTS ARE FUNDAMENTAL TO THE VISION OF A SHARED DIGITAL INFRASTUCTURE THAT CAN SUPPORT THE PUBLIC MEDIA SYSTEM, CREATE EFFICIENCIES OF SCALE AND COST SAVINGS AROUND COMMODITY TECHNOLOGIES. ENABLE THE DEVELOPMENT OF NEW PRODUCTS AND SERVICES MORE NIMBLY, AND ALLOW STATIONS TO FOCUS ON MISSION-DERIVED LOCAL CONTENT, BRAND POSITIONING, AND REVENUE DEVELOPMENT

#### NPR'S DISTRIBUTION DIVISION (DISTRIBUTION) OPERATES AND MANAGESTHE PUBLIC RADIO SATELLITE SYSTEM (PRSS) PRSS IS A COMBINEDSATELLITE AND INTERNET CONTENT DISTRIBUTION SERVICE FOR PUBLICRADIO PROGRAMMING AND RELATED DIGITAL CONTENT IN ADDITION TO ITSREGULAR OPERATIONS, DISTRIBUTION

MANAGES GRANT-FUNDED NATIONALPROJECT INITIATIVES IN SUPPORT OF THE PRSS ACTIVITIES RELATEDDIGITAL CONTENT IS COMPRISED OF NPR'S CONTENT AS

WELL AS CONTENTEROM OTHER PROGRAM PRODUCERS AND INDEPENDENT RADIO PRODUCERS. THEPRSS IS AVAILABLE TO PUBLIC RADIO STATIONS, REGARDLESS OF

COMMERCIAL CLIENTS FOR THEIR USE OF THE PRSS

Form 990, Part III, Line 4b:

SIZE.INCOME, ORGANIZATION, OR PROGRAMMING AFFILIATION THE ANNUALOPERATIONS OF THE PRSS ARE SUPPORTED BY THE FEES PAID BY BOTHPUBLIC AND

NPR'S MEMBERSHIP CONSISTED OF 264 NON-COMMERCIAL LICENSEES, OPERATING A NETWORK OF HUNDREDS OF ASSOCIATED PUBLIC RADIO STATIONS WHEN 84 NON-MEMBER PUBLIC RADIO LICENSEES AND THEIR ASSOCIATED STATIONS ARE ALSO INCLUDED, A GRAND TOTAL OF 1,092 PUBLIC RADIO STATIONS BROADCAST PROGRAMMING LICENSED FROM NPR NPR MEMBER ORGANIZATIONS INCLUDE LONG ESTABLISHED. HIGHLY REGARDED EDUCATIONAL INSTITUTIONS (INCLUDING MANY TOP PUBLIC AND PRIVATE COLLEGES AND UNIVERSITIES). AS WELL AS SOME OF THE LARGEST, MOST INFLUENTIAL STATION-BASED PUBLIC MEDIA ORGANIZATIONS IN

Form 990, Part III, Line 4c:

THE UNITED STATES INPR'S FINANCIAL AND ORGANIZATIONAL STRENGTH DERIVES IN SIGNIFICANT MEASURE FROM THE STRENGTH OF ITS MEMBERS AND THE NPR

MEMBER NETWORK AS A WHOLE NPR SERVES AND COLLABORATES WITH MEMBER STATIONS IN NEWSGATHERING AND REPORTING, PROGRAM DEVELOPMENT, CULTURAL EVENTS, COMMUNITY ENGAGEMENT, FUNDRAISING, RADIO AND DIGITAL DISTRIBUTION, AND REPRESENTATION ON ISSUES CRITICAL TO PUBLIC BROADCASTING

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	,				. ,	,		(11) 2(1000	(14) 2/4 200	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC) 0	organization and related organizations
JARL MOHN	39 50									
	•••••	×		×				645,741	0	31,164
PRESIDENT & CEO	0 50									
FABIOLA ARREDONDO	1 00									
	•••••	×						0	0	0
DIRECTOR	0 00									
CHRIS BOSKIN	1 00									
		×						0	0	0
DIRECTOR	0 00									
MIKE CRANE	1 00									
	•••••	X						0	0	0
DIRECTOR	1 00									

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CHRIS BOSKIN
DIRECTOR
MIKE CRANE
DIRECTOR
JOHN DECKER

DIRECTOR

FRED DUST

DIRECTOR

PAUL G HAAGA JR

BOARD CHAIR

ROGER LAMAY

DIRECTOR

DIRECTOR

DIRECTOR

NICO LEONE

WONYA LUCAS

.........

and Independent Contractors

(A) (D) (B) (C) (E) (F) Position (do not check more Name and Title Average Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JOYCE SLOCUM

KERRY SWANSON

CONNIE WALKER

JO ANNE WALLACE

CARLOS WATSON

.......

	dily flours   and a director/trastee/							(11, 2,4,000	(14, 5/4,000	monn the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
LAFONTAINE E OLIVER	1 00									
DIRECTOR	0 00	×						0	0	0
JAY PEARCE	1 00									
DIRECTOR	0 00	×						0	0	0
JACQUELINE RESES	1 00								0	
DIRECTOR	0 00	×						0	0	0

DIRECTOR	0 00					
JACQUELINE RESES	1 00	V				_
DIRECTOR	0 00	^			"	(
GOLI SHEIKHOLESLAMI	1 00	l ↓	v		0	,
BOARD VICE CHAIR	0 00	_ ^			J J	_
JEFF SINE	1 00					

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JACQUELINE RESES	1 00						Γ
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DIRECTOR	0 00					-	
GOLI SHEIKHOLESLAMI	1 00						
		l x	l x l		0	0	ı
BOARD VICE CHAIR	0 00						
JEFF SINE	1 00						Г
SELL SIME		l <sub>x</sub>			n	n	ĺ

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

MICHAEL F BEACH

VP, DISTRIBUTION

**DEBORAH A COWAN** 

CFO & TREASURER

JONATHAN HART

STANLEY M GARRISON TO 762019

CHIEF LEGAL OFFICER, GC, SECRETARY

......

VP, TECH OPS & BRDCST ENG

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	ally flours	"	a un	ecte	)   / CI	usice,	'	(14 2 (4 000	organizations	mom the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
HOWARD L WOLLNER	1 00	x						0	0	0	
DIRECTOR	1 00	l							3		
JOHN S WOTOWICZ	1 00	х						0	0	0	
DIRECTOR	0 00										
CARLOS ALVAREZ DIRECTOR	1 00	×						0	0	0	
DIRECTOR	0 00	l	I	I	I	1 1		l			

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DIRECTOR	0 00				Ĭ	J	
ТІМ ЕВҮ	1 00	_			0	0	
DIRECTOR	0 00	^			,	0	
JENNIFER FERRO	1 00	X		·	0	0	
DIRECTOR	0.00						

DIRECTOR	0 00	^			l "	U	
JENNIFER FERRO	1 00						
DIRECTOR	0 00	×			0	U	
NEAL ZUCKERMAN	1 00	×			0	0	

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JENNIFER FERRO	1 00	v			0	0	
DIRECTOR	0 00	^			9		
NEAL ZUCKERMAN	1 00	¥			0	0	
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NEAL ZUCKERMAN	1 00								

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414,997

and Independent Contractors (A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the compensation

from related

	any hours					ustee)		organization	organizations	from the organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
GEMMA HOOLEY	40 00			x				283,214	0	25,663	
SR VP, MEMBER PARTNERSHIP	0 00			^				203,211	0	23,003	
ELISABETH G LANG	40 00			,				105.517		20.502	
ASSISTANT TREASURER	0 00			×				185,547	0	29,598	
LOREN A MAYOR	39 90			х				473,886	0	34,023	
PRESIDENT, OPERATIONS	0 10							·			
MICHAEL E RIKSEN  VP, POLICY & REPRESENTATION	36 00 4 00			х				271,258	0	31,017	
MICHELLE M SHANAHAN	39 70			х				235,856	0	16,782	
ASSISTANT SECRETARY	0 30										
CHRISTOPHER TURPIN INTERIM SVP-NEWS, VP-EDITORIAL INNOV & NEWSROOM DEV	40 00  0 00			x				371,510	0	35,089	
<u>-</u>											

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250,944

316,388

395,592

262,678

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32,596

31,862

23,815

29,502

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0 00 40 00

0 00 40 00

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KEITH M WOODS

ANYA GRUNDMANN

THOMAS HJELM

MICHAEL LUTZKY

CHIEF DIGITAL OFFICER

VP, BUSINESS DEVELOPMENT

VP, DVRSTY IN NEWS & OPS AND ED TRNG

SR VP, PROGRAMMING AND AUDIENCE DEV

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	arry riours	"	a un	ecto	,,, с	usice,	,	Organización	(IV 2/4 200	110111 the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MARGARET GOLDTHWAITE	39 90			×				352,033	0	16,060	
CHIEF MARKETING OFFICER	0 10							· ·		,	
MATTHEW MYERS	40 00			x				258,273	0	1,153	
VP, BRAND & MARKETING	0 00			^`				250,275	J	1,133	
STEPHANIE WITTE TO 6152019 CHIEF DEVELOPMENT OFFICER	39 00			х				362,198	0	8,348	
STACEY FOXWELL	1 00 40 00										
VP, OPERATIONS	0 00			×				199,041	0	30,283	
				_	_	_	_				

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235,342

169,793

171,146

236,582

31,732

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16,104

9,904

12,752

32,393

1,113

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STAGET TOATFEEL
VP, OPERATIONS
SARAH GILBERT
VP, NEWS PROGRAMMING
KERRY LENAHAN

VP, PRODUCT

**EMILY LITTLETON** 

JOEL SUCHERMAN

NANCY BARNES

CARRIE STORER

VP, CORP COMMUNICATIONS

VP, NEW PLATFORM PARNERSHIPS

SR VP, NEWS AND EDITORIAL DIRECTOR

CHIEF HUMAN RESOURCES OFFICER

......

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer from the from related week (list compensation and a director/trustee)

organization

381,135

156,299

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organizations

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from the

35,330

1,645

any hours

and Independent Contractors

HOST, WWDTM

MARJORIE POWELL TO 1112018

FORMER VP. HUMAN RESOURCES

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	,			 .,		′		(1)		
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	 Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
STEVEN A INSKEEP SR HOST, MORNING EDITION	40 00 0 00				х		453,681	0	35,398	
DAVID GREENE SR HOST, ATC	40 00				х		331,543	0	32,441	
SCOTT SIMON	40 00				,		424.262			

	0 00						
DAVID GREENE	40 00			_	331,543	0	32,441
SR HOST, ATC	0 00				331,343	0	32,441
SCOTT SIMON	40 00			v	424,362	0	0
SR HOST, WE				^	727,302	Ŭ	0

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SR HOST, ATC	0 00				001,010		
SCOTT SIMON	40 00						
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SCOTT SIMON	40 00						
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SR HOST, WE	0 00						
MICHEL MARTIN	40 00						

0 00 0 00

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SCOTT SIMON	40 00	1		×	424.362	C	
SR HOST, WE	0 00			^	424,302	3	
MICHEL MARTIN	40 00						

SR HOST, WE	0 00			X	424,362	0	(	J
MICHEL MARTIN	40 00							_
				х	349.171	l o'	35,398	8

MICHEL MARTIN	40 00						
SPECIAL CORRESPONDENT & HOST				X	349,171	0	35,39
SPECIAL CORRESPONDENT & HOST	0 00						
PETER SAGAL	40 00						

efile	e GR/	APHIC prii	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9	3493232014050		
	m 99	OULE A	Com	plete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	a section	2018 Open to Public				
terns	l Reven	the Treasury		► Go to	www.irs.gov/Form	<u>990</u> for the late	st information	•	Inspection		
lam	e of th	<b>he organiza</b> JBLIC RADIO II	<b>tion</b> NC					Employer identific	Employer identification number		
Do.	rt I	Poscon	for Bublic (	harity Stat	<b>us</b> (All organization	c must comple	to this part \ C	52-0907625			
					eitis (For lines 1 thro			see mstructions.			
1		A church, c	onvention of o	churches, or as	ssociation of churches	described in <b>sec</b>	tion 170(b)(1)	(A)(i).			
2	$\Box$	A school de	escribed in <b>sec</b>	ction 170(b)(	1)(A)(ii). (Attach Scl	nedule E (Form 9	90 or 990-EZ))				
3	$\overline{\Box}$	A hospital o	or a cooperativ	ve hospital ser	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).			
4		A medical r name, city,		nization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	inter the hospital's		
5		-	ation operated (iv). (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	bed in <b>section 170</b>		
6		A federal, s	state, or local	government or	governmental unit de	escribed in <b>sectio</b>	on 170(b)(1)(A	i)(v).			
7	$\checkmark$	section 17	′0(b)(1)(A)(	vi). (Complete				nit or from the gener	al public described in		
8		A communi	ty trust descr	ıbed ın <b>sectio</b> ı	170(b)(1)(A)(vi)	(Complete Part I	I)				
9					escribed in <b>170(b)(1)</b> ee instructions Enter				lege or university or a		
D		from activit	ies related to income and u	ıts exempt fur ınrelated busır	(1) more than 331/39 actions—subject to cer less taxable income (le amplete Part III )	tain exceptions,	and (2) no more	than 331/3% of its s	upport from gross		
1					d exclusively to test fo	r public safety S	ee section 509	(a)(4).			
2		more public	cly supported	organizations (	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or sec	ction 509(a)(2	). See section 509(a			
a		<b>Type I.</b> A so	supporting org n(s) the powe	janization oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by			
b		manageme	nt of the supp		pervised or controlled in ation vested in the sare and C.						
С					supporting organizatio				ated with, its		
d		Type III n	on-functiona integrated T	ally integrate he organizatio	ions) You must com d. A supporting organ n generally must satis rt IV, Sections A and	Ization operated fy a distribution	ın connection wi requirement and	th its supported orga			
е		Check this	box if the org	anızatıon recei	ved a written determing integrated supporting	nation from the I		pe I, Type II, Type II	I functionally		
f	Enter			organizations	3:aapper 41119			_			
g	Provi	de the follow	ing information	on about the su	upported organization(						
	(i) N	Name of supported of the second of the secon		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No				
ota											
		work Reduc	tion Act Noti	ce, see the I	nstructions for	Cat No 11285	5F :	Schedule A (Form 9	90 or 990-EZ) 2018		

Schedule A (Form 990 or 990-EZ) 2018

	III. If the organization f	fails to qualify ur	nder the tests lis	sted below, plea	se complete Par	t III.)	
	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	80,146,318	92,102,494	85,256,475	97,140,734	109,112,881	463,758,902
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 80,146,318 92,102,494 85,256,475 97,140,734 109,112,881 463,758,902 The portion of total contributions by each person (other than a governmental unit or publicly 84,730,784 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column

Public support. Subtract line 5 379,028,118 from line 4 Section B. Total Support Calendar year (a)2014 **(b)**2015 (c)2016 (d)2017 (e)2018 (f)Total (or fiscal year beginning in) ▶ Amounts from line 4 80,146,318 92,102,494 85,256,475 97,140,734 109,112,881

Gross income from interest. dividends, payments received on 3,792,916 5,206,446 5,649,266 securities loans, rents, royalties 5,102,039 4,662,648 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on

463,758,902 24,413,315 10 Other income Do not include gain or loss from the sale of capital 633,068 564,400 483,535 389,165 149,743 2,219,911 assets (Explain in Part VI ) **Total support.** Add lines 7 through 11 490,392,128 12 Gross receipts from related activities, etc (see instructions) 12

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 77 290 % 15 Public support percentage for 2017 Schedule A, Part II, line 14 15 73 370 % ▶Ⅵ and stop here. The organization qualifies as a publicly supported organization

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

▶□ box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

▶□ organization

h 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

P	art IIII Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	below, please co	omplete Part II.	)	
30	Calendar year		43.50.5		412.004		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year			I	T		
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
_	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
13	(Explain in Part VI ) <b>Total support.</b> (Add lines 9, 10c,						
	11, and 12 )						
14	First five years. If the Form 990 is fo	r the organization	's fırst, second, tl	nird, fourth, or fift	:h tax year as a se	ction 501(c)(3) c	rganızatıon,
	check this box and stop here						▶ 🗆
Se	ection C. Computation of Public						
15	Public support percentage for 2018 (lin	ie 8, column (f) di	ivided by line 13,	column (f))		15	
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16	
Se	ection D. Computation of Invest						
17	Investment income percentage for 201	1 <b>8</b> (line 10c, colur	mn (f) divided by	line 13, column (f	())	17	
18	Investment income percentage from 2	<b>017</b> Schedule A, <sup>1</sup>	Part III, line 17			18	
19a	331/3% support tests—2018. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not
	more than 33 1/3%, check this box and s						▶ □
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	-			·		▶ □
20	Private foundation. If the organization		-				▶□
		AL GIG HOL CHECK O	. 20/ 011 11116 14, 1	a, or industrial	Carro Dov ariu 366		

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below 10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	Page 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	mstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	2~		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	36		

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E							
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8						
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1						
a	Average monthly value of securities	1a						
b	Average monthly cash balances	<b>1</b> b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)							
2	Acquisition indebtedness applicable to non-exempt use assets	2						
3	Subtract line 2 from line 1d	З						
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 035	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
	Section C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1						
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
				1				

4

Schedule A (Form 990 or 990-F7) 2018

Enter greater of line 2 or line 3

Schedule A (Form 990 or 990-EZ) (2018)

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

See instructions

d Excess from 2017.e Excess from 2018.

3<sub>j</sub> and 4c

8 Breakdown of line 7

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation SCHEDULE A, PART II, LINE 10, GARAGE REVENUE - 2014 AMOUNT \$ 334,070 2015 AMOUNT \$ 339,845 2016 AMOUNT \$ 358,861 2 EXPLANATION OF OTHER 017 AMOUNT \$ 366,802 2018 AMOUNT \$ 379,636 SPACE LICENSE FEES - 2014 AMOUNT \$ 160,830 INCOME 2015 AMOUNT \$ 103,370 2016 AMOUNT \$ 84,697 2017 AMOUNT \$ 24,233 2018 AMOUNT \$ 178 .118 OTHER REVENUE - 2014 AMOUNT \$ 138.168 2015 AMOUNT \$ 121.185 2016 AMOUNT \$ 39.97

7 2017 AMOUNT \$ -1.870 2018 AMOUNT \$ -408.011

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• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

# Political Campaign and Lobbying Activities

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

For Organizations Exempt From Income Tax Under section 501(c) and section 527

. 527

2.018

DLN: 93493232014050

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EZ)

SCHEDULE C (Form 990 or 990-

Complete if the organization is described below. ►Attach to Form 990 or Form 990-EZ.

►Go to www.irs.gov/Form990 for instructions and the latest information.

• Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NATIONAL PUBLIC RADIO INC 52-0907625 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	( <b>b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C (	Form 990 or 990-EZ) 2018

ь	Total lobbying expenditures to influence a legislative	body (direct lobbying)	
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and	d 1d)	
f	Lobbying nontaxable amount Enter the amount fron columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
	Not over \$500,000	20% of the amount on line 1e	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000		
		 •	
g	Grassroots nontaxable amount (enter 25% of line 1f		
h	Subtract line 1g from line 1a If zero or less, enter -(		

i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	rt II-B	m 990 or 990-EZ) 2018  Complete if the organization is exempt under section 501(c)(3) and has NOT fil	ed				age <b>3</b>
		Form 5768 (election under section 501(h)).					
or e	each "Yes" r	response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	_	(b)		
ctıv	rity		Yes No		Am		ınt
1		e year, did the filing organization attempt to influence foreign, national, state or local legislation, any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteer	·s?		No			
b	Paid staff	or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
С	Media adv	vertisements?		No			
d	Mailings t	o members, legislators, or the public?	Yes			4	133,234
е	Publicatio	ns, or published or broadcast statements?		No			
f	Grants to	other organizations for lobbying purposes?	Yes				183,094
g	Direct cor	ntact with legislators, their staffs, government officials, or a legislative body?		No			
h	Rallies, de	emonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other act	ıvıtıes?		No			
j	Total Add	d lines 1c through 1i				(	516,328
2a	Did the a	ctivities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
	•	enter the amount of any tax incurred under section 4912					
	-	enter the amount of any tax incurred by organization managers under section 4912					
		g organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	rt III-A	Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)$ $501(c)(6)$ .	(5), o	r secti	on		
1	Mara aub	stantially all (90% or more) dues received nondeductible by members?		_	1	Yes	No
2		rganization make only in-house lobbying expenditures of \$2,000 or less?		-	2		
3		rganization make only in-house lobbying expenditures of \$2,000 of less.  rganization agree to carry over lobbying and political expenditures from the prior year?		-	3		
_	rt IIII-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)	/E\ 0	r cocti		01/6	1/61
401	C III-D	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				) T O T	,(v)
1	Dues, ass	essments and similar amounts from members	1				
2		62(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).					
a b		ear r from last year	2a 2b				
	Total	TOTAL IASE YEAR	2c				
3		e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
<i>3</i> 4		were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	<u> </u>				
•	the organ	inzation agree to carryover to the reasonable estimate of nondeductible lobbying and political ire next year?	4				
5	Taxable a	mount of lobbying and political expenditures (see instructions)	5				

#### Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference Explanation LOBBYING ACTIVITY FORM 990,

NPR REPRESENTS NOT ONLY ITSELF, BUT ALSO THE PUBLIC RADIO SYSTEM AND PUBLIC RADIO STATIONS SCHEDULE C, PART II-B, LINE 1 TO LEGISLATIVE AND REGULATORY ENTITIES IN WASHINGTON DC IN FULFILLING THIS ROLE, NPR STAFF MET WITH MEMBERS OF CONGRESS AND THEIR STAFFS, COMMISSIONERS, AND STAFF AT THE FEDERAL COMMUNICATIONS COMMISSION, AND OTHER FEDERAL POLICY MAKING DEPARTMENTS DURING THE YEAR NPR'S CONTACT WITH THESE PARTIES RELATED TO ISSUES CONCERNING, BUT NOT LIMITED TO, THE BUDGET AND ANNUAL APPROPRIATIONS FOR AMERICA'S PUBLIC BROADCASTING SYSTEM THROUGH FUNDING TO THE CORPORATION FOR PUBLIC BROADCASTING, AIRWAVES ACT, AND GENERAL ISSUES RELATED TO C-BAND SPECTRUM AND THE PUBLIC RADIO'S USE OF C-BAND FREQUENCIES FOR PROGRAMMING DISTIBUTION SPECTRUM NPR ENGAGED A PROFESSIONAL SERVICES FIRM TO ASSIST WITH ITS REPRESENTATION ACTIVITIES NPR ALSO SOLICITS AND DISSEMINATES INFORMATION ABOUT PUBLIC RADIO AND ENCOURAGES THE PUBLIC TO SHARE THEIR VIEWS ABOUT PUBLIC RADIO WITH EACH OTHER AND THEIR ELECTED REPRESENTATIVES, DIRECTLY AND THROUGH THE AMERICAN COALITION FOR PUBLIC RADIO

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# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

DLN: 93493232014050 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

2

5

8

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **Employer identification number** NATIONAL PUBLIC RADIO INC 52-0907625 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2018

Par	t IIII	Organizations Ma	aintaining Colle	ections of A	rt, Histori	cal Tı	reası	ıres, or	Other	Similar As	sets (con	tinued)	
3	_	g the organization's acq s (check all that apply)	uisition, accession,	, and other rec	ords, check a	any of	the fo	llowing t	hat are a	sıgnıfıcant u	se of its co	llection	
а		Public exhibition			d		Loan	or excha	ange prog	ırams			
b		Scholarly research			е		Othe	r					
С		Preservation for future	generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII												
5		ng the year, did the orga s to be sold to raise fur								ılar	☐ Yes	□ No	
Pai	rt IV	Escrow and Cust Complete if the org X, line 21.			n Form 990	, Part	IV, lı	ine 9, or	reporte	ed an amou	nt on For	m 990, Pa	art
1a		e organization an agent ded on Form 990, Part )		n or other intei	rmediary for	contril	bution	s or othe	er assets I	not	☐ Yes	□ No	
b	If "Y∈	es," explain the arrange	ment in Part XIII a	and complete t	he following	table		[		Ar	nount		
С		nning balance		'	,				1c				
d	Addıt	ons during the year						İ	1d				
e	Dıstrı	butions during the year							1e				
f	Endın	ng balance						[	1f			0	
2a	Did th	he organization include	an amount on For	m 990, Part X,	line 21, for	escrow	or cu	ıstodıal a	ccount lia	bility?	☐ Yes	□ No	
		es," explain the arrange									_		
	rt V	Endowment Fund											
			·	(a)Current yea		nor yea			ears back	(d)Three yea		)Four years b	oack
1a	Beginn	ning of year balance .	[	316,715	,900 :	320,927	7,201	30	1,573,900	296,8	337,867	316,807	7,270
b	Contrib	butions		5	,396	105	5,201		6,044		10,147		664
c	Net inv	vestment earnings, gair	ns, and losses	5,401	,929	18,056	5,470	3	5,223,223	21,0	38,416	1,568	3,274
d	Grants	or scholarships	. [		0		0		0		0		0
е		expenditures for facilitie	es	12,661	,059	12,977	7,297	1	4,807,864	15,3	320,509	20,535	5,218
f	Admını	istrative expenses .	[		0	1,090	,581		1,068,102	g	92,021	1,003	3,123
g	End of	year balance	[	309,462	,166	325,020	),994	32	0,927,201	301,5	573,900	296,837	7,867
2	Provid	de the estimated percei	ntage of the currer	nt year end bal	ance (line 1g	g, colu	mn (a	)) held a	s				
а	Board	d designated or quasi-e	ndowment 🟲										
b	Perm	anent endowment 🕨	67 600 %										
С	Temp	porarily restricted endov	vment ▶ 32 40	00 %									
	The p	percentages on lines 2a,	, 2b, and 2c should	d equal 100%									
3a		here endowment funds nization by	not in the possess	ion of the orga	ınızatıon that	are h	eld an	ıd admını	stered fo	r the		Yes N	
	_	nrelated organizations									3a(i		No.
	• •	elated organizations .									3a(ii	-	
b		es" on 3a(II), are the rel		s listed as requ	ired on Sche	dule R	?.				3b	Yes	
4	Descr	ribe in Part XIII the inte	ended uses of the o	organızatıon's e	endowment f	unds						•	
Pai	rt VI	Land, Buildings,					<b>-</b>			000 =			
	Deccr	Complete if the ordinate of complete if the ordinate of complete.	ganization answe (a) Cost or othe		Cost or other					m 990, Par		10. Book value	
	Descri	property	(investmen		, cost or other	) ciebu		(c) Acc	amuiated t	ichi eciation	(u)	DOOK Value	
1a	Land					55,75	53,066					55,75	53,066
b	Buildin	ngs				145,45	56,027			22,612,941		122,84	43,086
c	Leaseh	nold improvements				3,54	<b>1</b> 6,560			2,517,762		1,02	28,798
d	Equipn	ment				52,09	91,438			31,018,778		21,0	72,660

10,894,882

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) .

4,975,298

205,672,908

5,919,584

Part VII	<b>Investments—Other Securities.</b> Complete if the See Form 990, Part X, line 12.				
	(a) Description of security or category (including name of security)		<b>(b)</b> Book value		Method of valuation end-of-year market value
	al derivatives				
	Tied equity interests	<u> </u>			
(A)					
[B)					
(C)					
(D)					
(E)					
F)					
(G)					
(H)					
Fotal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12 )	<b>&gt;</b>			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on F	orm 990. Pa	art IV. line	11c. See Form	990. Part X. line 13.
	(a) Description of investment		ok value	(c)	Method of valuation end-of-year market value
(1)				Cost of	end-or-year market value
(2)					
(3)					
(4)					
5)					
6)					
(7)					
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col (B) line 13 )	•			
Γotal. (Colum	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Fotal. (Colum			n 990, Part	IV, line 11d See	Form 990, Part X, line 15  (b) Book value
Part IX	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Part IX  1)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Part IX  1) 2)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4) 5) 6)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Total. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Total. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered  (a) Description  (b) must equal Form 990, Part X, col (B) line 15  Other Liabilities. Complete if the organization a				(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability			n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Must equal Form 990, Part X, col (B) line 15)  Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) Fotal. (Column 1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Fotal. (Column  7) 8.  1) Federal (1) 2)	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X  1) Federal (1) 2) 3)	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X  1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Part X  1) Fotal. (Columnary) Part X  1) Federal (1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Part X  1) Fotal. (Columnary) Part X  1) Federal (1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Part X  1) Fotal. (Columnary) Part X  1) Federal (1) 2) 3) 4) 5) 6)	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (Columpart X	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
Total. (Column Part IX	Other Assets. Complete if the organization answered  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (e) Description  (e) Description  (f) Description  (g) Description  (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value

Schedule D (Form 990) 2018

Pa		venue per Audited Financial Statements With Revenue per F zation answered 'Yes' on Form 990, Part IV, line 12a.	leturn	
1		upport per audited financial statements	1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on i			
ь	Donated services and use of facili	ties	1	
С	Recoveries of prior year grants	2c	7	
d	Other (Describe in Part XIII ) .	2d	1	
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b> .		3	
4	Amounts included on Form 990, F	art VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not include	d on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) .	4b	7	
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12 )	5	
Par		penses per Audited Financial Statements With Expenses per zation answered 'Yes' on Form 990, Part IV, line 12a.	Return.	
1	Total expenses and losses per au	dited financial statements	1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25		
а	Donated services and use of facili	ties		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII ) .	2d		
е	Add lines 2a through 2d	<del> </del>	2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3	
4	Amounts included on Form 990, F	art IX, line 25, but not on line 1:		_
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII ) $\ .$	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5		c. (This must equal Form 990, Part I, line 18 )	5	
Pai	t XIII Supplemental Info	rmation		
		art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Pa 2d and 4b Also complete this part to provide any additional information	rt V, line 4, P	art X, line 2, Part
	Return Reference	Explanation		
See /	Addıtıonal Data Table			
	<u> </u>			

Page 4

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

#### Additional Data

Software ID: Software Version:

EIN: 52-0907625

Name: NATIONAL PUBLIC RADIO INC

#### Supplemental Information

PART V, LINE 4

# Return Reference Explanation LINE 4 THE ENDOWNMENT FUNDS THAT SUPPORT NPR ARE HELD AND ADMINISTERED BY A RELATED ORGANIZATION, NPR FOUNDATION (FOUNDATION) THE ENDOWMENT CONSISTS OF FIFTY-SIX FUNDS ESTABLISHED BY DON ORS FOR A VARIETY OF PURPOSES (E.G., NPR'S GENERAL MISSION AND OPERATIONS, JOURNALISTIC EX

PROGRAMMING. SCIENCE JOURNALISM. AND THE OPERATION OF NPR'S FACILITIES)

CELLENCE, DIGITAL INNOVATIONS/ NEW TECHNOLOGIES, CULTURAL JOURNALISM, JAZZ JOURNALISM AND

Supplemental Information	
Return Reference	Explanation
FIN 48 DISCLOSURE FORM 990, SCHEDULE D, PART X, LINE 2	THE EFFECTS OF A TAX POSITION CANNOT BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENT S UNLESS IT IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED BASED SOLELY ON ITS TECHNICAL MERITS AS OF THE REPORTING DATE THE MORE-LIKELY-THAN-NOT THRESHOLD REPRESENTS A POSITIVE ASSERT ION BY MANAGEMENT THAT NPR IS ENTITLED TO THE ECONOMIC BENEFITS OF A TAX POSITION IF A TAX POSITION IS NOT CONSIDERED MORE-LIKELY-THAN-NOT TO BE SUSTAINED BASED SOLELY ON ITS TECH NICAL MERITS, NO BENEFITS OF THE POSITION ARE TO BE RECOGNIZED MOREOVER, THE MORE-LIKELY-THAN-NOT THRESHOLD MUST CONTINUE TO BE MET IN EACH REPORTING PERIOD TO SUPPORT CONTINUED R ECOGNITION OF A BENEFIT AS OF SEPTEMBER 30, 2019, THERE WERE NO UNCERTAIN TAX POSITIONS FOR WHICH A LIABILITY SHOULD BE RECORDED

efile GRAPHIC print	- DO NOT I	PROCESS	As Filed Data -			DLN:	93493232014050		
SCHEDULE F (Form 990)	State	ement of	Activities (	es Outside the United States OMB No 15					
(1 01111 330)	lete if the organi	Yes" to Form 990, Part IV, I	ıne 14b, 15	i, or 16.	2018				
				to Form 990.	_				
Department of the Treasury	•	Go to www.irs.	gov/Form990 for II	nstructions and the latest ir	nformation.	•	Open to Public Inspection		
Internal Revenue Service						F			
Name of the organization NATIONAL PUBLIC RADIO I	INC					Employer iden	tification number		
						52-0907625			
Part I General In Form 990, F			s Outside the U	Jnited States. Comple	te if the o	organization a	nswered "Yes" to		
1 For grantmakers.	Does the or	ganızatıon ma	ıntaın records to	substantiate the amount	of its gra	nts and			
other assistance, th	ne grantees'	eligibility for th	he grants or assis	stance, and the selection	criteria u	sed			
to award the grants	s or assistan	ce?					☐ Yes ☐ No		
2 For grantmakers. outside the United :		Part V the org	anızatıon's proce	dures for monitoring the	use of its	grants and oth	her assistance		
<b>3</b> Activites per Region	(The following	ng Part I, line 3	table can be dupli	cated if additional space is	needed )				
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program s	activity listed in (d) is a ram service, describe specific type of ervice(s) in region  (f) Total expend for and investment in region			
See Add'l Data									
3a Sub-total b Total from continuation	on sheets to	1	7 17				5,983,83		
Part I c Totals (add lines 3a a	4 31-)						5,000,00		
	and 3b) l	1	기 17	i e	I		5,983,83		

Schedule F (Form 990) 2018							Page <b>3</b>
Part IIII Grants and Otl				<b>ed States.</b> Complete r	f the organization ar	nswered "Yes" to Form 9	990, Part IV, line 16.
	duplicated if addit			1	1		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Scne	dule F (Form 990) 2018		Page <b>4</b>
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		$\square$ Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	<b>✓</b> Yes	☐ No

Schedule F	(Form 990) 2018	Page :
Part V	amounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide
	ReturnReference	Explanation

Schedule F (Form 990) 2018

#### **Additional Data**

EUROPE

# Software ID: Software Version:

**EIN:** 52-0907625

Name: NATIONAL PUBLIC RADIO INC

NEWS AND INFORMATION

1,058,758

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	describe specific type of service(s) in region	(†) Total expenditures for region
EAST ASIA AND THE PACIFIC	4	4	PROGRAM SERVICES	NEWS AND INFORMATION	1,307,642

2 PROGRAM SERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) 5 PROGRAM SERVICES NEWS AND INFORMATION 1.664.091 MIDDLE EAST AND NORTH AFRICA 1 IPROGRAM SERVICES INEWS AND INFORMATION 323,377 NORTH AMERICA

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) RUSSIA/ INDEPENDENT 1 PROGRAM SERVICES NEWS AND INFORMATION 288.612 STATES INEWS AND INFORMATION 401,636 SOUTH AMERICA 1 IPROGRAM SERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) SOUTH ASIA 1 PROGRAM SERVICES NEWS AND INFORMATION 302.812 SUB-SAHARAN AFRICA 2 PROGRAM SERVICES INEWS AND INFORMATION 636,906

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -					DLI	N: 93493232014050	
Schedule I (Form 990)  Department of the Treasury Internal Revenue Service	Grants and Other Assistance to Organizations,  Governments and Individuals in the United States  Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  Attach to Form 990.  Go to www.irs.gov/Form990 for the latest information.							2018 Open to Public Inspection	
Name of the organization NATIONAL PUBLIC RADIO IN	С						Employer identification 52-0907625	ation number	
Part I General Info	ormation on Grants	and Assistance				•			
the selection criteria u  Describe in Part IV the  Part II Grants and Otl	sed to award the grants organization's procedure	or assistance? es for monitoring the usi estic Organizations ar	e of grant funds in the Un	ited States	for the grants or assistan	r	990, Part IV, line	Yes No 21, for any recipient	
(a) Name and address o organization or government	f (b) EIN	(c) IRC section (if applicable)	( <b>d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of ash assistance	(h) Purpose of grant or assistance	
(1) AMERICAN COALITION FOR PUBLIC RADIO 1111 NORTH CAPITOL STR NE WASHINGTON, DC 20002		501(C)(4)	439,854			PAYROLL	OLL, DIRECT COSTS - GRASS ROOTS LOBBYING		
	( )( )		listed in the line 1 table .					1	
For Paperwork Reduction Act			<u> </u>	Cat No 5005		· · ·		edule I (Form 990) 2018	

Page **2** 

Schedule I (Form 990) 2018

(5) (6)

Schedule I (Form 990) 2018

(7) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference **Explanation** PART I, LINE 2 NPR OFFERS ASSISTANCE IN THE FORM OF A FELLOWSHIP. FELLOWSHIPS ARE PAID TO THE RECIPIENTS THROUGH NPR'S COMPENSATION PROCESS. BECAUSE NPR STAFF DIRECTLY SUPERVISE THE FELLOWS, NO ADDITIONAL MONITORING IS DEEMED NECESSARY FELLOWSHIPS FORM 990. THE KROC FELLOWSHIP WAS ESTABLISHED TO IDENTIFY AND DEVELOP A NEW GENERATION OF EXTRAORDINARY JOURNALISTS FOR THE PUBLIC RADIO SYSTEM

SCHEDULE I, PART III NPR ACCEPTS SEVERAL FELLOWS EACH YEAR THE FELLOWSHIP LASTS ONE YEAR AND INCLUDES A STIPEND PLUS BENEFITS FELLOWS RECEIVE RIGOROUS, HANDS-ON-TRAINING IN EVERY ASPECT OF PUBLIC RADIO JOURNALISM (WRITING, REPORTING, PRODUCING, AND EDITING) FOR BOTH RADIO AND WEB FELLOWS WORK

PRIMARILY AT NPR HEADOUARTERS IN WASHINGTON. DC. THOUGH EACH FELLOWSHIP WILL INCLUDE AN ASSIGNMENT TO AN NPR MEMBER STATION ELIGIBLE CANDIDATES MUST BE EITHER JUST COMPLETING COLLEGE OR GRADUATE SCHOOL OR BE OUT OF SCHOOL FOR ONE YEAR OR LESS. CANDIDATES MUST SUBMIT A RESUME, TWO REFERENCES, AND A COVER LETTER EXPLAINING WHY HE/SHE SHOULD BE SELECTED BY THE KROC FELLOWSHIP COMMITTEE

efil	e GRAPHIC pr	int - DO NOT PROCESS As F	iled Dat	a -	DLN: 934	9323	32014	050	
Sch	edule J	Comp	ensat	ion Information	МО	IB No	1545-0	0047	
(For	n 990)	For certain Officers, Di	ectors, T	rustees, Key Employees, and Hig	nest				
		Complete if the organizat	ompensation answ	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	<b>2018</b>			
			➤ Attach	to Form 990.					
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/For</u>	<u>11990</u> for	instructions and the latest inform	nation.		to Pul ectio		
	ne of the organiza				Employer identificat				
NAI	IONAL PUBLIC RADI	O INC			52-0907625				
Pa	rt I Questi	ons Regarding Compensation							
							Yes	No	
1a		piate box(es) if the organization providection A, line 1a Complete Part III to រុ							
	First-class	or charter travel		Housing allowance or residence for j	personal use				
	_	companions	님	Payments for business use of persor					
		ification and gross-up payments	님	Health or social club dues or initiation					
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cner)				
b		tes in line 1a are checked, did the orga II of the expenses described above? If			ent or reimbursement	<b>1</b> b			
2		tion require substantiation prior to reil es, officers, including the CEO/Executiv			1-2	2			
	directors, truste	es, officers, including the CEO/Executive	/e Directo	r, regarding the items checked in line	la,				
3		f any, of the following the filing organi EO/Executive Director Check all that a			e				
	_	d organization to establish compensati		,	n Part III				
	<b>✓</b> Compensa			Markhan and law and a sake at					
		ition committee ent compensation consultant	✓	Written employment contract Compensation survey or study					
		of other organizations	<b>☑</b>	Approval by the board or compensa:	tion committee				
		-							
4	related organiza	did any person listed on Form 990, Pa tion	irt VII, Se	ction A, line 1a, with respect to the fi	ling organization or a				
а	Receive a sever	ance payment or change-of-control pay	ment?			4a	Yes		
b		receive payment from, a supplement		ified retirement plan?		4b	100	No	
С	•	receive payment from, an equity-base	•	•		4c		No	
	If "Yes" to any o	f lines 4a-c, list the persons and provi	de the app	olicable amounts for each item in Part	III				
	0	. F04(-)(4)		t					
5		<b>), 501(c)(4), and 501(c)(29) orgar</b> d on Form 990, Part VII, Section A, Iir		-					
•		ontingent on the revenues of	c ru, ala	the organization pay or accrac any					
а	The organization	17				5a		No	
b	Any related orga	inization?				5b		No	
	If "Yes," on line	5a or 5b, describe in Part III							
6		d on Form 990, Part VII, Section A, lir ontingent on the net earnings of	e 1a, dıd	the organization pay or accrue any					
а	The organization	17				6a		No	
b	Any related orga					6b		No	
_	•	6a or 6b, describe in Part III							
7	payments not d	d on Form 990, Part VII, Section A, lir escribed in lines 5 and 6? If "Yes," desc	ribe in Pa	rt III	I	7		No	
8		nts reported on Form 990, Part VII, pa Itial contract exception described in Re			escribe	_			
9		3, did the organization also follow the r	ahuttabla	precumption procedure described in	Regulations section	8		No	
7	53 4958-6(c)?	o, aid the organization also follow the f	enuttable	presumption procedure described in	regulations section	9			
For I	Danerwork Pedu	ction Act Notice, see the Instruction	ns for Fo	orm 990 Cat No. 5	0053T Schedule 1	/Forn	990)	2018	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Part II Officers, Directors, Trustees, Rey Employees, and Ting							
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	≥ction A, line 1a, a	pplicable column (ر	<u>ン) and (E) amour</u>	nts for that indi	vidual
(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other	( <b>D)</b> Nontaxable benefits	columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						•	
	1	1	1		1	I	1
							!
				+			
	+			+			
				+			
1-		-		+			
1							
			1				

chedule J (Form 990) 2018					
Part III Supplemental Information					
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation				
PART I, LINE 4A	MARJORIE POWELL RECEIVED SEVERANCE PAY TOTALING \$133,875				

Software ID:

**Software Version:** 

**EIN:** 52-0907625

Name: NATIONAL PUBLIC RADIO INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule	: J,				Highest Compensate	d Employees		<u></u>
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation				(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
JARL MOHN PRESIDENT & CEO	(1)	495,679	150,000	62	17,875	13,289	676,905	0
	(11)	0	0	0	0	0	0	0
MICHAEL F BEACH VP, DISTRIBUTION	(1)	245,230	0	52	16,301	16,835	278,418	0
	(11)	0	0	0	0	0	0	0
DEBORAH A COWAN CFO & TREASURER	(i)	299,693	75,000	19	17,875	8,823	401,410	0
STANLEY M GARRISON TO	(ı)	258,472	0	52	17.110	16.066	202.609	0
762019 VP, TECH OPS & BRDCST ENG	(11)	0	0	0	17,118     0	16,966  0	292,608  0	
JONATHAN HART CHIEF LEGAL OFFICER, GC,	(1)	352,435	62,500	62	17,875	13,289	446,161	0
SECRETARY	(11)	0	0	0	0	0	0	0
GEMMA HOOLEY SR VP, MEMBER	(1)	263,195	20,000	19	17,210	8,453	308,877	0
PARTNERSHIP	(11)	0	0	0	0	0	0	0
ELISABETH G LANG ASSISTANT TREASURER	(1)	185,495	0	52	12,772	16,826	215,145	0
	(11)	0	0	0	0	0	0	0
LOREN A MAYOR PRESIDENT, OPERATIONS	(1)	371,526	102,284	76	17,875	16,148	507,909	0
· ·	(11)	0	0	0	0	0	0	0
MICHAEL E RIKSEN VP, POLICY &	(1)	271,196	0	62	17,875	13,142	302,275	0
DEDDECENTATION	(11)	0	0	0	0	0	0	0
MICHELLE M SHANAHAN ASSISTANT SECRETARY	(1)	225,856	10,000	0	14,658	2,124	252,638	0
	(11)	0	0	0	0	0	0	0
CHRISTOPHER TURPIN INTERIM SVP-NEWS,VP-	(1)	351,458	20,000	52	17,875	17,214	406,599	0
EDITORIAL INNOV	(11)	0	0	0	0	0	0	0
KEITH M WOODS VP, DVRSTY IN NEWS &	(1)	245,944	5,000	0	16,656	15,940	283,540	0
	(11)	0	0	0	0	0	0	0
ANYA GRUNDMANN SR VP, PROGRAMMING AND	(1)	272,657	35,000	8,731	17,875	13,987	348,250	0
AUDIÉNCE DEV	(11)	0	0	0	0	0	0	0
THOMAS HJELM CHIEF DIGITAL OFFICER	(1)	345,563	50,000	29	15,365	8,450	419,407	0
	(11)	0	0	0	0	0	0	0
MICHAEL LUTZKY VP, BUSINESS	(1)	237,602	25,000	76	13,590	15,912	292,180	0
DEVELOPMENT	(11)	0	0	0	0	0	0	0
MARGARET GOLDTHWAITE CHIEF MARKETING OFFICER	(ı)	306,957	45,000	76	0	16,060	368,093	0
	(11)	0	0	0	0	0	0	0
MATTHEW MYERS VP, BRAND & MARKETING	(1)	243,273	15,000	0		1,153	259,426	0
	(11)	0	0	0	0	0	0	0
STEPHANIE WITTE TO 6152019	(1)	312,180	50,000	18		8,348	370,546	0
OFFICER	(11)	0	0	0	0	0	0	0
STACEY FOXWELL VP, OPERATIONS	(1)	198,989	0	52	13,486	16,797	229,324	0
	(11)	0	0	0	o	0	0	0
SARAH GILBERT VP, NEWS PROGRAMMING	(1)	230,342	5,000	0	14,950	1,154	251,446	0
· ·	(11)	0	0	0	0	0	0	0

(E) Total of columns (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (F) Compensation in benefits other deferred (B)(I)-(D)column (B) (iii) (i) Base Compensation compensation reported as deferred on Bonus & incentive Other reportable prior Form 990 compensation compensation KERRY LENAHAN 159,793 10,000 9,904 179,697 VP, PRODUCT **EMILY LITTLETON** 171,146 11,154 1,598 183,898 VP, CORP COMMUNICATIONS JOEL SUCHERMAN 229,530 7,000 15,437 16,956 268,975 VP, NEW PLATFORM PARNERSHIPS STEVEN A INSKEEP 453,605 19,250 16,148 489,079 SR HOST, MORNING **EDITION** DAVID GREENE 316,471 15,000 19,250 13,191 363,984 SR HOST, ATC SCOTT SIMON 424,286 424,362 SR HOST, WE MICHEL MARTIN 324,095 25,000 19,250 16,148 384,569 SPECIAL CORRESPONDENT & HOST PETER SAGAL 380,089

1,046

133,875

19,250

937

16,080

708

416,465

157,944

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

22,424

HOST, WWDTM

1112018 FORMER VP. HUMAN RESOURCES

MARJORIE POWELL TO

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493232014050 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Department of the Treasury ▶ Attach to Form 990. Internal Revenue Service ▶Go to www.irs.gov/Form990 for the latest information. Inspection Employer identification number Name of the organization NATIONAL PUBLIC RADIO INC 52-0907625 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (q) Defeased (h) On (i) Pool behalf of financina issuer Yes No Yes No Yes No DISTRICT OF COLUMBIA 53-6001131 2548396V0 04-07-2010 165,835,493 NPR HEADQUARTERS PROJECT Χ Χ DISTRICT OF COLUMBIA 53-6001131 25483VNX8 05-02-2013 88,716,473 PARTIAL REFUNDING OF 2010 Х Χ Χ DISTRICT OF COLUMBIA 81,342,438 PARTIAL REFUNDING OF 2010 Χ 53-6001131 25483VRP1 05-12-2016 Χ Х BOND Part  ${f I}$ **Proceeds** C D 3,110,000 90,000 155,000 2 153,850,000 3 165,835,492 88,716,473 81,342,438 5 6 68,089,113 7 8 9 10 154,115,380 11 12 13 2013 Yes No Yes No Yes No No Were the bonds issued as part of a current refunding issue? . . . . Χ Χ Χ 14 Were the bonds issued as part of an advance refunding issue? . . . . . 15 Χ Х Χ Has the final allocation of proceeds been made? . . . . . . . . . . . Х Х 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Χ Part Ⅲ **Private Business Use** Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Χ Χ Are there any lease arrangements that may result in private business use of bond-financed Χ Χ Χ Schedule K (Form 990) 2018 Cat No 50193E For Paperwork Reduction Act Notice, see the Instructions for Form 990.

b

C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

D

D

Schedule K (Form 990) 2018

No

Yes

Yes

C

No

X

Χ

1 360 %

17 630 %

18 990 %

Χ

Х

Yes

Χ

No

Χ

Χ

Χ

Χ

Х

C

Are there any research agreements that may result in private business use of bond-financed

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

counsel to review any research agreements relating to the financed property?

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Rebate not due yet? . . . . . . .

Exception to rebate? . . . . . . . . . . . .

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Yes

Χ

No

Χ

Χ

Χ

Χ

Х

Α

Yes

Χ

Nο

Χ

Χ

1 360 %

17 630 %

18 990 %

Х

Χ

Yes

Χ

No

Χ

Χ

Χ

Χ

X

В

Yes

Χ

No

Х

Χ

1 360 %

17 630 %

18 990 %

Χ

Х

Yes

Χ

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Page 3

No

Nο

D

Yes

Yes

В

Nο

Explanation

No

Χ

Х

Yes

Yes

Х

No

No

Yes

Х

No

Yes

No

Χ

Х

Yes

Χ

Χ

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

INPR IS CLOSELY MONITORING THE PRIVATE USE OF ITS BOND-FINANCED FACILITY

Schedule K (Form 990) 2018

(GIC)?

period?

Part V

Part VI

AND 6(B)

Arbitrage (Continued)

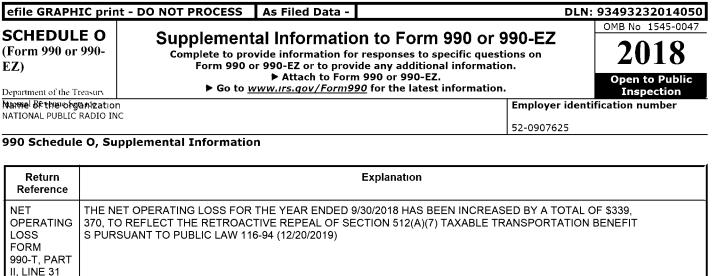
the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

Return Reference

SCHEDULE K, PART III, LINES 6(A)

Return Reference	Explanation							
	REBATE REPORT TO THE COMPUTATION DATE MARCH 31, 2015, WHICH REFLECTED ACTIVITY TO MARCH 31, 2015, OPINION DATED APRIL 23, 2015							



Return Explanation
Reference

FORM 990,
PART VI,
SECTION A,
LINE 6

ENTITIES INDEPENDENTLY LICENSING AND OPERATING PUBLIC RADIO STATIONS BECOME NPR MEMBERS BY
MEETING CERTAIN REQUIREMENTS AND PAYING DUES TO NPR, IN EXCHANGE, MEMBERS MAY VOTE TO ELE
CT CERTAIN REPRESENTATIVES TO THE NPR BOARD OF DIRECTORS AND THE MEMBERS WILL BENEFIT FROM
BROADCAST AND DIGITAL RIGHTS NEGOTIATED ON THEIR BEHALF, AS WELL AS SERVICES EXTENDED ONL
Y TO MEMBERS

Return

Reference

FORM 990,	OF THE 23 SEATS ON THE NPR BOARD OF DIRECTORS (BOARD), 12 SHALL BE ELECTED FROM THE AUTHOR
PART VI,	IZED STATION REPRESENTATIVES AS A BENEFIT OF MEMBERSHIP, EACH MEMBER STATION MAY DESIGNAT
SECTION A,	E, IN WRITING, ONE STATION REPRESENTATIVE (AUTHORIZED STATION REPRESENTATIVES) WHO MAY PAR
LINE 7A	TICIPATE AND VOTE TO ELECT MEMBER DIRECTORS OF THE BOARD EACH AUTHORIZED STATION REPRESEN
	TATIVE SHALL VOTE AND ACT FOR THE MEMBER STATION IN ALL MATTERS ON WHICH MEMBER STATIONS'
	VOTE AFFECTS NPR CERTAIN AMENDMENTS TO THE NPR BYLAWS MUST BE APPROVED BY THE MEMBERSHIP

Explanation

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. SAME AS 7A PART VI. SECTION A. LINE 7B

Return Explanation
Reference

FORM 990,	THE RETURN IS PREPARED AND REVIEWED BY NPR'S FINANCE DEPARTMENT. IT IS ALSO REVIEWED BY NP
PART VI,	R'S GENERAL COUNSEL'S OFFICE, KEY MEMBERS OF NPR'S LEADERSHIP, AND BY AN INDEPENDENT ACCOU
SECTION B,	NTING FIRM THE FINAL VERSION IS MADE AVAILABLE TO ALL NPR DIRECTORS PRIOR TO FILING WITH
LINE 11B	THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	NPR REGULARLY MONITORS AND SURVEYS DIRECTORS, OFFICERS, AND KEY EMPLOYEES TO IDENTIFY POSS IBLE CONFLICTS OF INTEREST NPR'S GENERAL COUNSEL IS AUTHORIZED TO SEEK INFORMATION FROM D IRECTORS, OFFICERS, AND KEY EMPLOYEES AS TO CONFLICTS OF INTERESTS, NONPUBLIC CORPORATE IN FORMATION, AND GRATUITIES AS THEY DEEM APPROPRIATE, INCLUDING PERIODIC DISCLOSURE OF INFOR MATION ABOUT THE INTERESTS WHICH COULD LEAD TO CONFLICTS OF INTERESTS IN REGARDS TO ACTUA L OR APPARENT CONFLICTS OF INTERESTS, A DIRECTOR SHALL 1) REFRAIN FROM ANY USE OF THEIR P OSITION AS A DIRECTOR WHICH IS MOTIVATED BY, OR GIVES THE APPEARANCE OF BEING MOTIVATED BY, THE DESIRE FOR GAIN FOR THE DIRECTOR OR FOR ANOTHER PERSON OR ORGANIZATION WITH WHICH THEY ARE ASSOCIATED, 2) DISQUALIFY THEMSELF FROM FORMAL OR INFORMAL DISCUSSIONS WITH DIRECTO RS OR PARTICIPATION IN ANY DECISIONS WHICH POSE A CONFLICT OF INTEREST OR THE APPEARANCE OF A CONFLICT OF INTEREST IF SUCH DISQUALIFICATION IS NECESARRY, THE DIRECTOR SHALL INFORM THE CHAIR OF THE BOARD OR RELEVANT COMMITTEE OF THAT DISQUALIFICATION, AND IF THE DIRECTO R HAS NOT ALREADY DONE SO. THE CHAIR SHALL AS SOON AS POSSIBLE THEREATTER INFORM THE OTHER DIRECTORS OR COMMITTEE MEMBERS AND NPR'S GENERAL COUNSEL OF SUCH DISQUALIFICATION IN CERTAIN CIRCUMSTANCES, A DIRECTOR MAY REQUEST, IN A WRITING DIRECTED TO THE GENERAL COUNSEL, THAT A DISCLOSURE BE TREATED CONFIDENTIALLY IF THERE IS ANY QUESTION AS TO WHETHER THERE IS A CONFLICT OF INTEREST, THE DIRECTOR, BOARD, OR COMMITTEE SHALL REQUEST A WRITTEN OPINI ON FROM NPR'S GENERAL COUNSEL REGARDING THE PROPRIETY OF THE DIRECTOR'S INVOLVEMENT AFTER CONSULTING WITH NPR'S GENERAL COUNSEL, THE CHAIR OF THE BOARD SHALL MOVE THAT THE BOARD VOTE SUCH CORRECTIVE ACTIONS AS MAY BE NECESSARY OR APPROPRIATE TO REMEDY ANY VIOLATION OF THE CONFLICT OF INTEREST POLICY FOR NPR DIRECTORS AS DETERMINED BY THE BOARD SUCH MOTION SHALL BE MADE AT THE CHAIR'S INITIATIVE OR AT THE REQUEST OF ANY DIRECTOR CONFLICTS OF IN

Return Reference	Explanation
FORM 990,	NPR SEEKS TO ENSURE THAT COMPENSATION IS REASONABLE UNDER SECTION 4958 AND REPRESENTS THE
PART VI,	FAIR MARKET VALUE FOR SERVICES RENDERED NPR ROUTINELY UTILIZES BENCHMARK STUDIES AND INDE
SECTION B,	PENDENT REVIEW OF MARKET COMPENSATION DATA FROM BOTH NONPROFIT AND MEDIA ORGANIZATIONS, PR
LINE 15	EPARED BY COMPENSATION CONSULTANTS, AT THE TIME OF EMPLOYEE HIRING OR WHEN SPECIAL COMPENS
	ATION ADJUSTMENTS ARE AWARDED NPR SETS COMPENSATION WITHIN THE RANGE OF THE GOING MARKET
	RATE NO INDIVIDUAL HAVING A CONFLICT OF INTEREST UNDER NPR'S CONFLICT OF INTEREST POLICY
	IS PERMITTED TO PARTICIPATE IN THE COMPENSATION REVIEW OR DECISION MAKING PROCESS NPR MAI
	NTAINS ALL RECORDS REGARDING COMPENSATION DECISIONS

Return Explanation
Reference

FORM 990,	AUDITED FINANCIAL STATEMENTS AND FORMS 990 AND 990-T ARE POSTED AND AVAILABLE FOR DOWNLOAD
PART VI,	AT WWW NPR ORG (HTTP //WWW NPR ORG/ABOUT-NPR/178660742/PUBLIC-RADIO-FINANCES) ARTICLES O
SECTION C,	F INCORPORATION AND CONFLICT OF INTEREST POLICIES ARE AVAILABLE UPON REQUEST
LINE 19	

Return Reference	Explanation
EXECUTIVE COMMITTEE FORM 990, PART VI, LINE 1A	THE BOARD OF DIRECTORS MAY, UPON THE RECOMMENDATION OF THE CHAIR AND BY RESOLUTION PASSED BY THE AFFIRMATIVE VOTE OF THE MAJORITY OF THE DIRECTORS PRESENT AT A MEETING AT WHICH A Q UORUM IS PRESENT, DESIGNATE AN EXECUTIVE COMMITTEE CONSISTING OF THE CHAIR, VICE-CHAIR, PR ESIDENT, THE CHAIR OF EACH OF THE ADDITIONAL COMMITTEES AND BODIES DESIGNATED BY THE BOARD OF DIRECTORS (EXCLUDING ANY CHAIRS WHO ARE NOT DIRECTORS OF THE BOARD), AND OTHER DIRECTO RS APPOINTED BY THE CHAIR, SUBJECT TO APPROVAL BY A MAJORITY OF DIRECTORS PRESENT AT A MEE TING AT WHICH A QUORUM IS PRESENT IF DESIGNATED, THE EXECUTIVE COMMITTEE SHALL MEET AT THE CALL OF THE CHAIR OR OF AT LEAST THREE (3) MEMBERS OF THE COMMITTEE AT THE REQUEST OF THE CHAIR, THE EXECUTIVE COMMITTEE SHALL OVERSEE THE OPERATIONS AND ACTIVITIES OF THE CORPORATION BETWEEN MEETINGS OF THE BOARD, INCLUDING HAVING AND EXERCISING THE AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE CORPORATION THE EXECUTIVE COMMITTEE SHALL NO LATER THAN TEN DAYS BEFORE THE NEXT MEETING OF THE BOARD OF DIRECTORS REPORT TO THE ENTIR E BOARD OF DIRECTORS ANY ACTIONS IT TAKES EXERCISING THAT AUTHORITY THE EXECUTIVE COMMITT EE SHALL NOT AUTHORIZE DISTRIBUTIONS, APPROVE OR RECOMMEND TO MEMBERS DISSOLUTION, MERGER, OR THE SALE, PLEDGE OR TRANSFER OF SUBSTANTIALLY ALL OF THE CORPORATION'S ASSETS, ELECT, APPOINT OR REMOVE DIRECTORS OR FILL VACANCIES ON THE BOARD OF DIRECTORS OR ON ANY OF ITS COMMITTEES, OR ADOPT, AMEND OR REPEAL THE ARTICLES OF INCORPORATION OR BYLAWS OF THE CORPORATION

Return Explanation
Reference

990 Schedule O, Supplemental Information

JOINT NPR CONTINUES TO CONSIDER ITS OPTIONS REGARDING A JOINT VENTURE POLICY, IN THE MEANTIME, K
VENTURE
POLICY NPR DEPARTMENTS INVOLVED IN THE DECISION MAKING PROCESS FOR NEW JOINT VENTURES HAVE BEE
N EDUCATED AND FULLY UNDERSTAND THE REQUIREMENTS NECESSARY OF AN EXEMPT ORGANIZATION TO SA
FORM 990,
PART VI,
LINE 16B

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(Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

### **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Publi

**Employer identification number** 

DLN: 93493232014050

OMB No 1545-0047

Open to Public Inspection

NATIONAL PUBLIC RADIO INC 52-0907625 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)NPR FOUNDATION GENERAL SUPPORT DC 501(C)(3) 509(A)(3) NPR INC Yes 1111 NORTH CAPITOL STREET NE WASHINGTON, DC 20002 52-1795789 (2) AMERICAN COALITION FOR PUBLIC RADIO DC INFORMATION 501(C)(4) NPR INC Yes 1111 NORTH CAPITOL STREET NE WASHINGTON, DC 20002 82-1246245 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2018

(a) Name, address, and EIN related organization	N of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomii income(re unrelati excluded tax und sections 514)	nant lated, ed, from der 512-	(f) Share of total incom		( <b>I</b> Disprop alloca	rtionate	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or aging ner?	(k Percer owne	ntage
NATIONAL PUBLIC MEDIA		MEDIA	NY	NPR ASSET	RELATED		170,07	7	Yes	No No		Yes	No No	72.4	000 %
66 W 56 ST EW YORK, NY 10019 1156765		UNDERWRITER	N	HOLDING COMPANY	RELATED		170,07	,		NO			NO	/2 (	J00 %
Part IV Identification of Related Or because it had one or more re							zation an	swered "Ye	s" on I	Form	990, Part I\	√, line	e 34		
(a) Name, address, and EIN of related organization	( <b>b)</b> Primary activity	Le dor (state d	c) egal nicile or foreign ntry)		(d) controlling entity	Type (C corp	(e) of entity p, S corp, trust)	(f) Share of total Income		(g) e of end year assets	-of- Perd	(h) entage nership	9	Section (13) co	i) 512(b ntrolle ity?
1)NPR ASSET HOLDING COMPANY INC	HOLDING COMPANY		C	NPR II	NC NC	С		-202,808	3	5,841,	631 100	000 %		103	No
111 NORTH CAPITOL ST NE /ASHINGTON, DC 20002 3-2226766															
															-

(1)NPR FOUNDATION

(3)NPR FOUNDATION

(2)NATIONAL PUBLIC MEDIA LLC

(4)AMERICAN COALITION FOR PUBLIC RADIO

No

No

No

No

No

No

No No

1i

1j

1k

11 Yes

1m

1n 1o | Yes

(d)

Method of determining amount involved

Schedule R (Form 990) 2018

Yes

Yes 1p |

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.		
Note: Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule	Yes	No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		res	NO					
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?									
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No					
Ь	Gift, grant, or capital contribution to related organization(s)	<b>1</b> b	Yes						
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes						
d	Loans or loan guarantees to or for related organization(s)	<b>1</b> d		No					
е	Loans or loan guarantees by related organization(s)	1e		No					
f	Dividends from related organization(s)	1f		No					
g	Sale of assets to related organization(s)	<b>1</b> g		No					

Loans or loan guarantees to or for related organization(s)	ld	
Loans or loan guarantees by related organization(s)	1e	
Dividends from related organization(s)	<b>1</b> f	
Sale of assets to related organization(s)	<b>1</b> g	
Purchase of assets from related organization(s)	1h	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(b)

Transaction type (a-s)

Ν

0

(c)

Amount involved

16,204,899

240,286

89,618

439.854

FMV

FMV

FMV

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . .

Name of related organization

Lease of facilities, equipment, or other assets to related organization(s) . . .

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

r Other transfer of cash or property to related organization(s) . . .

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See mistractions regarding exclusion													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		ganizations?	(f) Share of total Income	(g) Share of end-of-year assets		_	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	n 99	0) 2018

Schedule R (Form 990) 2018								
Part VII	Supplemental Info	tal Information						
	Provide additional infor	mation for responses to questions on Schedule R (see instructions)						
Return Reference		Explanation						